

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	S	71531	1.3.01
O.I.P.E. CLASSIFIER	RSD		11/12/00
FORMALITY REVIEW	S	71531	1.3.01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	1-29-01
2	1-30-01
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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